PTO/SB/01 (08-03)

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DECLADATION FOR LITH ITV OR

DESIGN	First Named Inventor DON M. BUCKNER							
PATENT APPLICATION	COMPLETE IF KNOWN							
(37 CFR 1.63)	Application Number							
Declaration Declaration	Filing Date							
Submitted OR Submitted after Initial With Initial Filing (surcharge	Art Unit							
Filing (37 ČFR 1.16 (e)) required)	Examiner Name							
I hereby declare that:								
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.								
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for								
which a patent is sought on the invention entitled:								
VACUUM HOSE WOBBLER								
· ·	he Invention)							
the specification of which								
is attached hereto								
OR	_							
was filed on (MM/DD/YYYY)	as United States Application Number or PCT International							
<u> </u>	ded on (MM/DD/YYYY) (if applicabl).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material information which is material information which is	aterial to patentability as defined in 37 CFR 1.56, including for became available between the filing date of the prior application							
and the national or PCT international filing date of the continu	ation-in-part application.							
	O(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, any PCT international application which designated at least one							
country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date								
before that of the application on which priority is claimed.	micate(s), or any PC1 international application having a filing date							
Prior Foreign Application Foreign Fil	ing Date Priority Certified Copy Attach d?							
Number(s) Country (MM/DD/	YYYY) Not Claimed Yes N							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.								

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner f r Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])	Name			Family Name or Surname BUCKNER				
Inventor's Signature	Men					Date V 11/19/03		
Residence: City	State		Country			Citizenship /		
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NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])				Family Na or Surnan				
Inventor's Signature						Date		
Residence: City	State		Country	Country		Citizenship		
Mailing Address								
City	State		ZIP Cou		Cour	ntry		
Additional inventors or a legal representative are being named on thesupplemental sheet(s) PTO/SB/02A or 02LR attached hereto.								